

Department of Commerce Division of Corporations & Commercial Code Limited Liability Partnership Registration Information Change Form

Non-Refundable Processing Fee: \$13.00	Entity File Number:	
Entity Name:		
For each Yes button that you mark the qu	estion will appear below for you to fill out	t.
1). Do you want to Change the Business Purpose?	Yes	No
1). If Yes, what is the new Business Purpose?		
2). Do you want to Change the Registered Agent or the Address of	the Registered Agent? Yes	No

2). If Yes, who is the new Registered Agent, or the new Address of the Registered Agent?

The address must be listed if you have a non-commercial registered agent. See instructions for further details.

Utah Street Address Requir	ed, PO Boxes can be listed after th	ne Street Address	
City		State UT	Zip
3). Do you want to Change the Principal Address of the Bu	siness Entity?	Yes	No
3). If Yes, what is the new Principal Address?			
Address:	City	State	Zip
4). Do you want to Add individuals to the Business Entity?		Yes	No
4). If Yes, who do you want to Add to the Business Entity a	nd what Position will they hold	1?	
Name:	Position:		
Address:	City	State	Zip
Name:	Position:		
Address:	City	State	Zip
5). Do you want to Remove individuals from the Business H	Entity?	Yes	No
5). If Yes, who do you want to Remove from the Business E	Cntity and what Position do the	y hold?	
Name:	Position:		
Name:	Position:		
6). Do you want to Change the Address of the Business Ent	ity's Principal(s)?	Yes	No
6). If Yes, who is the Principal(s) whose Address you wish t	to Change?		
Name:	Position:		
Address:	City	State	Zip
Name:	Position:		
Address:	City	State	Zip

Under GRAMA {63G-2-201}, all registration information maintained by the Division is classified as public record. For confidentiality purposes, you may use the business entity physical address rather than the residential or private address of any individual affiliated with the entity.

Under penalties of perjury and as an authorized authority, I declare that this statement of change(s), has been examined by me and is, to the best of my knowledge and belief, true, correct and complete.

Name/Title:	Signature:	Date: